

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)	Docket Number (Optional) 19603/4252 (CRF D-3124-03)
<p>CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop _____, Comer, for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or being facsimile transmitted to the USPTO at _____, on _____.</p>	
In re Application of Jahn et al.	
Application Number 10/538,434 Filed December 17, 2003	
For RECESSIVE PLANT VIRAL RESISTANCE RESULTS FROM MUTATIONS IN TRANSLATION INITIATION FACTOR eIF4E	
Group Art Unit 1638 Examiner Li Zheng	
Signature: _____ Name: _____	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.	
The requested extension and appropriate entity fee are as follows (check time period desired):	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$65/\$130) \$ _____ <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$245/\$490) \$ _____ <input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$555/\$1100) \$ <u>555.00</u> <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$865/\$1730) \$ _____ <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1175/\$2350) \$ _____	
<input checked="" type="checkbox"/> Applicant claims small entity status. <input type="checkbox"/> A check to cover the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>141138</u> . I have enclosed a duplicate copy of this sheet.	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.	
I am the <input type="checkbox"/> applicant/inventor	
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____.	
<hr style="width: 30%; margin-left: 0;"/> <u>/Michael L. Goldman/</u> <hr style="width: 30%; margin-left: 0;"/> Signature <hr style="width: 30%; margin-left: 0;"/> <u>Michael L. Goldman</u> <hr style="width: 30%; margin-left: 0;"/> Typed or printed name	
<hr style="width: 30%; margin-left: 0;"/> <u>October 14, 2009</u> <hr style="width: 30%; margin-left: 0;"/> Date <hr style="width: 30%; margin-left: 0;"/> <u>(585) 263-1304</u> <hr style="width: 30%; margin-left: 0;"/> Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.	
<input type="checkbox"/> Total of _____ forms are submitted.	

SEND TO: Commissioner for Patents
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